

PHARMACY & THERAPEUTICS COMMITTEE

Meeting 12/16/2008

Present: Tom Simpatico, Tommie Murray, Anne Jerman, Fran Levine, Mary Beth Bizzari, Richard Munson, Steve Barden, Brenda Wetmore, Ed Riddle

Absent: Deb Bard, Terry Rowe, Patrick Kinner, Sarah Merrill, Kate Plummer

Topic 1: Standardized Medical Order Forms:

Discussion: Some difficulties in process have been identified regarding the standardized order forms. Ex: Pts who are already on the medication, patients who take the meds sporadically

Action plan:

- Dr Simpatico to meet with Anne Jerman, Dr Mooney, a Nurse Manager and Sarah Merrill.
- Once this work is complete, Tom Simpatico will address the Medical Staff.
- Another group to pull together for diagnosis including Wendy Magee.

Topic 2: ADR's

Discussion: Six reports, none of which exceed a category E. No reports from Brooks 2, Steve Bard is going to address to the team to do reporting.

Action:

- Potential training for staff with Rosie
- Scott Perry is going to check with Wendy Magee about adding the icon to the desktop.

Topic 3: MVR's

Discussion: Twenty-three reports, none of which exceed a category E.

The highest numbers of MVRs are related to Transcription. A Performance Improvement initiative has been implemented by Nursing Education to review the process and expectations.

The electronic MAR will eliminate some of the issues, but is not viewed as a solution at this time.

Next steps:

Will monitor for change.

Topic 4: PRN's

Discussion:

Clarification: PRN orders do not expire. What is expected is that MDs review the need for, the use of and the effectiveness of PRNs meds each week as they review the patient status in the Comprehensive Progress Note. Nurses need to document the reason for the PRN and the effect.

Next Steps:

Quality will be auditing PRN medications. First report expected in February.

Topic 5: Transfer Orders Between VSH Units

Clarification: PRN's and Transfer Medications don't need to be rewritten. Patients are remaining within Psychiatry Service, so there is not a change in service. MDs and RNs do need to communicate the patient's status using the Transfer Notes.

Action:

- Anne Jerman is going to send an email to staff to let them know of this information.

Topic 6: Food & Drug Interaction / Dietary Consultation:

Discussion: With new Pharmacy system, more triggers are possible to identify potential food / drug interaction.

Action:

- Tommie and Anne mentioned that it might be helpful to have a sub-committee (smaller group) working on this. The group would consist of Deana, Deb, Mary Beth, Tommie, possibly Wendy just for better flow of information. Tommie and Anne also said that Deb needs to bring to the next meeting a 3 month summary/report of the Dietary Consultation and Food and Drug interactions which would be the last 3 month's.

Topic 6: Abdominal Circumference:

Discussion: Abdominal circumference was added to the Initial Nursing Assessment several months ago. Experience has shown the day of admission is not the best time to obtain measurements patients may consider invasive. The need for abdominal circumferences is limited to those patients at risk of or having weight gain / metabolic syndrome.

Action: Remove from the Initial Assessment form at admissions
MD will order when needed.

Next meeting: January 29 @ 2:30pm (nursing classroom)

Tentative Agenda:

- Review of ADR reports: Sarah Merrill / Team
- Review of Medication Variance Reports: Sarah Merrill / Team
- Review and discussion of Dietary Consultation: Deb Bard / Team
 - Consults
 - Process
- Results from work group related to Standardized Orders: Tom Simpatico / Team
- Other items